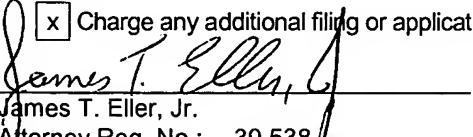




*JTE/jg*

AMENDMENT TRANSMITTAL LETTER				Docket No. 0465-1054P																																											
Application No. 10/673,447-Conf. #2622	Filing Date September 30, 2003	Examiner J. A. Ward	Art Unit 2875																																												
Applicant(s): Kyoung S. HA et al.																																															
Invention: LIQUID CRYSTAL DISPLAY DEVICE AND BACKLIGHT THEREOF																																															
<b>MS Amendment</b> <b>Commissioner for Patents</b> <b>P.O. Box 1450</b> <b>Alexandria, VA 22313-1450</b>																																															
Transmitted herewith is an amendment in the above-identified application.																																															
The fee has been calculated and is transmitted as shown below.																																															
<table border="1"> <thead> <tr> <th colspan="6">CLAIMS AS AMENDED</th> </tr> <tr> <th></th> <th>Claims Remaining After Amendment</th> <th>Highest Number Previously Paid</th> <th>Number Extra Claims Present</th> <th>Rate</th> <th></th> </tr> </thead> <tbody> <tr> <td>Total Claims</td> <td>28</td> <td>- 27 =</td> <td>1</td> <td>x 50.00</td> <td>50.00</td> </tr> <tr> <td>Independent Claims</td> <td>6</td> <td>- 3 =</td> <td>3</td> <td>x 200.00</td> <td>600.00</td> </tr> <tr> <td colspan="5">Multiple Dependent Claims (check if applicable) <input type="checkbox"/></td> <td></td> </tr> <tr> <td colspan="5">Other fee (please specify):</td> <td></td> </tr> <tr> <td colspan="5"><b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b></td> <td>650.00</td> </tr> </tbody> </table>						CLAIMS AS AMENDED							Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate		Total Claims	28	- 27 =	1	x 50.00	50.00	Independent Claims	6	- 3 =	3	x 200.00	600.00	Multiple Dependent Claims (check if applicable) <input type="checkbox"/>						Other fee (please specify):						<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b>					650.00
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Total Claims	28	- 27 =	1	x 50.00	50.00																																										
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Multiple Dependent Claims (check if applicable) <input type="checkbox"/>																																															
Other fee (please specify):																																															
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b>					650.00																																										
<input checked="" type="checkbox"/> Large Entity			<input type="checkbox"/> Small Entity																																												
<input type="checkbox"/> No additional fee is required for this amendment.																																															
<input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____ A duplicate copy of this sheet is enclosed.																																															
<input checked="" type="checkbox"/> A check in the amount of \$ 650.00 to cover the filing fee is enclosed.																																															
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.																																															
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. 02-2448 as described below. A duplicate copy of this sheet is enclosed.																																															
<input checked="" type="checkbox"/> Credit any overpayment.																																															
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.																																															
 James T. Eller, Jr. Attorney Reg. No.: 39,538			Dated: September 28, 2005																																												
BIRCH, STEWART, KOLASCH & BIRCH, LLP 8110 Gatehouse Rd Suite 100 East P.O. Box 747 Falls Church, Virginia 22040-0747 (703) 205-8000																																															



PTO/SB/17 (12-04v2)

Approved for use through 7/31/2006. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.

Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

## FEE TRANSMITTAL For FY 2005

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT	(\$)	650.00
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### Complete if Known

Application Number	10/673,447-Conf. #2622
Filing Date	September 30, 2003
First Named Inventor	Kyoung S. HA
Examiner Name	J. A. Ward
Art Unit	2875
Attorney Docket No.	0465-1054P

### METHOD OF PAYMENT (check all that apply)

Check     Credit Card     Money Order     None     Other (please identify): \_\_\_\_\_  
 Deposit Account    Deposit Account Number: 02-2448    Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below     Charge fee(s) indicated below, except for the filing fee  
 Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17     Credit any overpayments

### FEE CALCULATION

#### 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

<u>Application Type</u>	<u>FILING FEES</u>		<u>SEARCH FEES</u>		<u>EXAMINATION FEES</u>		<u>Fees Paid (\$)</u>
	<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>	<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>	<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

#### 2. EXCESS CLAIM FEES

##### Fee Description

Each claim over 20 (including Reissues)

<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>
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<u>Fee (\$)</u>	<u>Fee (\$)</u>
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Each independent claim over 3 (including Reissues)

50	25
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Multiple dependent claims

200	100
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360	180
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<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>
28	- 27 = 1	x 50.00	= 50.00	
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	
6	- 3 = 3	x 200.00	= 600.00	

#### 3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
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- 100 = \_\_\_\_\_ /50 (round up to a whole number) x \_\_\_\_\_ = \_\_\_\_\_

#### 4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): \_\_\_\_\_

#### SUBMITTED BY

Signature		Registration No. (Attorney/Agent)	39,538	Telephone	(703) 205-8000
Name (Print/Type)	James T. Eller, Jr.		Date	September 28, 2005	



MS AMENDMENT  
PATENT  
0465-1054P

IN THE U.S. PATENT AND TRADEMARK OFFICE

Applicant: Kyoung Su HA et al. Conf.: 2622  
Appl. No.: 10/673,447 Group: 2875  
Filed: September 30, 2003 Examiner: Ward, John A.  
For: LIQUID CRYSTAL DISPLAY DEVICE AND BACKLIGHT  
THEREOF

**AMENDMENT UNDER 37 C.F.R. § 1.111**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

September 28, 2005

Sir:

In response to the Examiner's Office Action dated June 28, 2005, Applicants respectfully submit the following amendments and remarks in connection with the above-identified application.

**This reply includes**

**Amended Claim Set; and**

**Remarks.**

09/29/2005 SZENDIE1 00000148 10673447

01 FC:1201 600.00 OP  
02 FC:1202 50.00 OP